UNITED STATES OF AMERICA		DO NOT W	/RITE I	N THIS SPACE
NATIONAL LABOR RELATIONS BOARD		Case	Date	filed
CHARGE AGAINST LABOR ORGANIZATION AGENTS		25-CB-252661		2/2/2019
INSTRUCTIONS: File an original of this charge with the	ie NLRE Regional D	irector of the region in whic	the a	leged unfair labor practice
occurred or is occurring.  1. LABOR ORGANIZATION	OR ITS AGENTS AG	AINST WHICH CHARGE IS BE	OUGH	
a. Name NALC, Branch 39		b. Union Representative to Paul Toms President		
c. Address 2211 E. 54th Street, Indianapolis, IN 46220		d. Tel. No. (317)251-6252	(3	Cell No. 17)417-6252
		f. Fex No.	g. e.	Mail aulatoms@ameritech.net
The above-named labor organization or its agents have 8(b)(1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices affecting commerce with	se unfair labor practic hin the meaning of the	es are unfair practices affect Act and the Postal Reorgan	ing com	merce within the meaning of Act.
Beels of the Charge (set forth a clear and concise state Since about (b) (6), (b) (7)(c) 2019, the above-na exercise of rights protected by Section 7 of the redress and refusing to process    Concept	med labor organi he Act by failing to	zation has restrained a o adequately represent	nd coe (b) (6),	erced employees in the (b) (7)(C) during an EEO
7 (b) (6), (b) (7)(C) (c) (b) (7)(C) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	25, 27, Jh. 9, (6), (b) (7) (C) (000)	rievance ber (b) (6),	(b) (7	perul fil
USPS (b) (6), (b) (7)(C)		(317) 870-8502 4c. Fax No.	4d. (	-Mail
5. Location of Plant Involved (street, city, state, and ZIP c	ode)	6. Employer representative	to cont	ea
3939 Vincennes Road, Indianapolis, IN 4626	8	Jeff Lefler HR Mana	ger	
7. Type of Establishment (factory, mine, wholeseler)	8. Principal product		9, N	imber of Workers employed
Postal Service	Mail	/	20	
10(b) (6), (b) (7)(C) arty filing charge		11a. Tel. No.		(6), (b) (7)(C)
	11c. Fax No.	11 & (b) (6), (b) (7)(C)		
11. Address of party filing charge (street, city, state, and Z	IP code)	- Des Principal de State de La companya de la comp	-	
(b) (6), (b) (7)(C)	12. DECLARAT	rion		
I declare that I have read the above charge and			t of my	knowledge and belief.
		NO. OF THE OWNER OW	Tel N	
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(		_	(6), (b) (7)(C)
( <sub>(b)</sub> (6), (b) (7)(C) on making charge)		and title or office, if any	and deligation of	(6), (b) (7)(C)
(b) (6), (b) (7)(C)		Date:	Fax	0.
		10/21/9	ė• (b)	(6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routing set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006), The NLRB will further explain these uses upon request. Disc osure of this information will cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA		DO NOT V	WRITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATIO	N OR ITS	25-CB-253291	12/12/19
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.	ne NLRB Regional Di	irector of the region in whi	ch the alleged unfair labor practice
	OR ITS AGENTS AGA	AINST WHICH CHARGE IS BI	ROUGHT
a Name SPFPA, Local 27		b Union Representative (b) (6), (b) (7)(C)	
c. Address 4100 N. Wickham Road, Ste. 107A, #195		d. Tel. No. (b) (6), (b) (7)(C)	e.e. Celi No.
Melbourne, FL 32935-2474		f. Fax No.	g. e-Mail
h. The above-named labor organization or its agents hav 8(b), subsection (1)(A) of the National Labor Relations meaning of the Act, or are unfair practices affecting co     Basis of the Charge (set forth a clear and concise state)	Act, and these unfair mmerce within the me	labor practices are unfair preaning of the Act and the Po	actices affecting commerce within the stal Reorganization Act.
Since about (b) (c) (7)(c) 2019, the above-name exercise of rights protected by Section 7 of the regarding emoval from permanent permane	he Act by refusing lost and the Empl ad faith. Specifica	g to process the grieval oyer's failure and refus ally, the Union failed to	nce of (b) (6), (b) (7)(C) cal to assign on the large of timely provide and/or delayed
Name of Employer     Triple Canopy	<u></u>	4a. Tel. No. (501)529-5837	4b. Cell No. (501)529-5837
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP c	eode)	6. Employer representativ	e to contact
5155 N. Shadeland, Suite 101 Indianapolis, IN 46226		James Kendall Contract Manager	,
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc		9. Number of Workers employed
Personnel Contractor	Guard Service	es	150
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.
(1-) (0) (1-) (7) (0)		(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C)		11c. Fax No.	11d e-Mail (b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and 2 (b) (6), (b) (7)(C)	ZIP code)		
	12. DECLARA	TION	
I declare that I have read the above charge and	that the statements	therein are true to the bes	
(b) (6), (b) (7)(C)(b) (6), (b) (7)(C)	(b) (6), (b)	(7)(C)	Tel No. (b) (6), (b) (7)(C)
(signature of representative or person making charge)	Prinutype na	me and title of office, if any	Cell No.
Address: (b) (6), (b) (7)(C)		Date:	Fax No.
		12/11/2019	e-Mail (b) (6), (b) (7)(C)

## WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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(b) (6), (b) (7)(C)

UNITED STATES OF AMERICA	DO NOT WRITE IN THIS SPACE				
NATIONAL LABOR RELATIONS BOARD	Case		Date filed		
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS	25-CB-		12/9/19		
INSTRUCTIONS: File an original of this charge with the NLRB Regional Di occurred or is occurring.			_		
LABOR ORGANIZATION OR ITS AGENTS AGA					
a. Name	b. Union Representative to Contact				
IBEW Local 176	Mike Clemmons, Business Manager				
c. Address	d, Tel. No.		e.e. Cell No.		
1100 N East Frontage Road	(815) 7	29-1240			
Joliet, IL 60431	f. Fax No.		g. e-Mail		
	<u> </u>		mc@ibewlocal176.com		
h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices within the meaning of section 8(b), subsection(s) (1)(A)of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the Act, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.					
2. Basis of the Charge (set forth a clear and concise statement of the facts con	stituting the a	lleged unfair labo	or practices)		
2. Basis of the Charge (set torth a clear and concise statement of the facts constituting the alleged unfair labor practices)  Since about (b) (6), (b) (7)(C) 2019, the above-named Labor Organization has restrained and coerced employees in					
the exercise of rights protected by Section 7 of the Act by refusing to process the termination grievance of					
or arbitrary or discriminatory reasons or in bad faith.					

3. Name of Employer		4a. Tel No. (225) 412-6455	4b. Cell No.
Allied Power		4c. Fax No.	-4d p-Mell
		1 TO. 1 BX (NO.	(b) (6), (b) (7)(C)
5. Location of Plant involved (street, city, state, and ZIP of	ode)	6. Employer representative	to contact
400 Convention Street		Chris	
Baton Rouge, LA 70802			
(work dispute location: Morris, IL)			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	t or service	Number of Workers employed
Power Plant	Power Plant		400
10. Full name of party filing charge (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No. (b) (6), (b) (7)(C)
		11c. Fax No.	11d e-Mail (b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and Z	TP çode)		
(b) (6), (b) (7)(C)			
	12. DECLARAT	TION	
I declare that I have read the above charge and	that the statements	therein are true to the best	
(b) (6), (b) (7)(C)			Tel No.
B	(b) (6), (b) (7	7)(C)(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
(signature or representative or person making charge)		ne and title or office, if any	Cell No.
Address:		Date:	Fax No.
(b) (6), (b) (7)(C)		Dec 6 2019	e-Mail (b) (6), (b) (7)(C)

# WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 er seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

not assigned

DO NOT WRITE IN THIS SPACE

NATIONAL LABOR RELATIONS BOARD		Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATION AGENTS		25-CB-253246	12/10/19		
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice occurred or is occurring.					
	OR ITS AGENTS AG	AINST WHICH CHARGE IS BR	ROUGHT		
a. Name American Postal Workers Union, Local 130		b. Union Representative to (b) (6), (b) (7)(C)	o Contact		
c. Address 1509 Prospect Street, Indianapolis, IN 46203		d. Tel. No. (317)634-1783	e.e. Cell No.		
		f. Fax No.	g. e-Mail		
<ul> <li>The above-named labor organization or its agents have 8(b)(1)(A) and (2) of the National Labor Relations Act, meaning of the Act, or are unfair practices affecting con</li> </ul>	and these unfair labo mmerce within the me	or practices are unfair practice eaning of the Act and the Pos	es affecting commerce within the stal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state					
Since about (b) (6) (b) (7)(C) 2019, the above-name		_	has attempted to cause		
and caused the USPS to eliminate my overti	me for arbitrary a	nd retaliatory reasons.			
Name of Employer     United States Postal Service		4a. Tel. No.	4b. Cell No.		
		4c. Fax No.	4d. e-Mail		
		1	1		
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representative	e to contact		
615 South Capitol Avenue, Indianapolis, IN 4	•	6. Employer representative Sherrie Cooper	e to contact		
• • • • • • • • • • • • • • • • • • • •	•	Sherrie Cooper	Number of Workers employed		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory	16225	Sherrie Cooper	Number of Workers employed     80		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc	Sherrie Cooper	9. Number of Workers employed		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge	8. Principal produc	Sherrie Cooper et or service	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)		
7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge	16225 8. Principal produc Mail	Sherrie Cooper ct or service	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and 2)	16225 8. Principal produc Mail	Sherrie Cooper ct or service	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and 2)	16225 8. Principal produc Mail	Sherrie Cooper et or service  11a. Tel. No.  11c. Fax No.	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	16225  8. Principal product Mail  CIP code)  12. DECLARA	Sherrie Cooper tor service  11a. Tel. No.  11c. Fax No.	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	16225  8. Principal product Mail  CIP code)  12. DECLARA	Sherrie Cooper tor service  11a. Tel. No.  11c. Fax No.	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	16225  8. Principal product Mail  CIP code)  12. DECLARA	Sherrie Cooper tor service  11a. Tel. No.  11c. Fax No.	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	Mail  Mail  TP code)  12. DECLARA I that the statements	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  TION Is therein are true to the bes	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)  (b) (6), (b) (7)(C)	Mail  Mail  Mail  12. DECLARA  I that the statements  (b) (6), (b)	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  TION Is therein are true to the bes	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)  at of my knowledge and belief.  Tel No.  Cell No.		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	Mail  Mail  Mail  12. DECLARA  I that the statements  (b) (6), (b)	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  TION Is therein are true to the bes	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)  tof my knowledge and belief.  Tel No.  Cell No. (b) (6), (b) (7)(C)		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)  (b) (6), (b) (7)(C)  12. Ibove charge and C (signature or representative or person making charge)  Address:	Mail  Mail  Mail  12. DECLARA  I that the statements  (b) (6), (b)	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  TION Is therein are true to the bes	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)  at of my knowledge and belief.  Tel No.  Cell No.		
615 South Capitol Avenue, Indianapolis, IN 2 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)  (b) (6), (b) (7)(C)  (c) Beove charge and (signature or representative or person making charge)	Mail  Mail  Mail  12. DECLARA  I that the statements  (b) (6), (b)	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  TION Is therein are true to the best  (7)(C) Ime and title or office, if any  Date:	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)  st of my knowledge and belief.  Tel No.  Cell No. (b) (6), (b) (7)(C)  Fax No.		
615 South Capitol Avenue, Indianapolis, IN 4 7. Type of Establishment (factory, mine, wholesaler) Factory 10. Full name of party filing charge (b) (6), (b) (7)(C)  11. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)  (b) (6), (b) (7)(C)  12. Ibove charge and C (signature or representative or person making charge)  Address:	Mail  Mail  Mail  12. DECLARA  I that the statements  (b) (6), (b)	Sherrie Cooper It or service  11a. Tel. No.  11c. Fax No.  11ON IS therein are true to the bes  (7)(C) Ime and title or office, if any	9. Number of Workers employed 80 11b. Cell No. (b) (6), (b) (7)(C)  11d e-Mail (b) (6), (b) (7)(C)  tof my knowledge and belief.  Tel No.  Cell No. (b) (6), (b) (7)(C)		

UNITED STATES OF AMERICA

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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INTERNET FORM NLRB-508 (2-08)

#### FORM EXEMPT UNDER 44 U.S.C 3512

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

## **CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS**

	TOTAL EXEMIT TOTALER TOTAL		
DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
25-CB-253384	12/16/19		

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ntair labor pra	ctice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
USW Local 115		Spencer L	. Buchanan	
		Title: Loca	I 115 Presid	ent
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
2555 South 30th Street		(765) 474-50	000	(765) 413-7957
IN Lafayette 47909		f. Fax No.	50	g. e-Mail
		(765) 474-55	50	(b) (6), (b) (7)(C)
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor p	oractices)	
Coo additional naga				
See additional page				
		4- T-I N-	ı	L Call Na
3. Name of Employer		4a. Tel. No. (765) 771-35	21	b. Cell No.
Arconic		c. Fax No.	21	d. e-Mail
5.1. 6. 6.1. 6.1. 6.1. 6.1. 6.1. 6.1.				
5. Location of plant involved (street, city, state and ZIP code)			6. Employ John Ade	er representative to contact
3131 Main Street IN Lafayette 47909-				or Relations Manager
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or convice	9 Numbo	r of workers employed
Misc. Fabricated Products	Aluminum	OI SCIVICE	o. Hambo	i oi workors omployed
	Aluminum	11a. Tel. No.	<u> </u>	b. Cell No.
10. Full name of party filing charge		(b) (6), (b) (7)(		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		c. Fax No.	_	d. e-Mail
44.414				(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)	1			<u> </u>
(-) (-) (-) (-)				
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	f.	No. (b) (6), (b	o) (7)(C)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Cell		1/7/01
	name and title or office, if any		(b) (6), (b	) (/)(C)
(b) (6) (b) (7)(c)	Title:	Fax	INO.	
(b) (6), (b) (7)(C)		e-M	ail	
	(date) 12/16/201		(b) (C)	, (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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## **Basis of the Charge**

## 8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights

protected by Section 7 of the Act by threatening to retaliate against employees if they did not join or support the union.

Name of the Union Agent/Representative who made the threat	Date the threats were made
(b) (6), (b) (7)(C)	September 6, 2019

## 8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

FORM NLRB-508 (4-19)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE			
	Date Filed		
25-CB-253424	12/16/19		

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

A LABOR ORGANIZATION OR IT	TO A OFFITO	A C A IN IOT MAIN DOLL OF LA DA	25 10 000	LIGHT			
1. LABOR ORGANIZATION OR IT	IS AGENTS A	AGAINST WHICH CHARG	3E IS BRO	UGHI			
a. Name International Brotherhood of Teamsters Local 414				b. Union Representative to contact George Gerdes, Secretary Treasurer			
c. Address (Street, city, state, and ZIP code) 2644 Cass Street			d. Tel. No 260-483		e. Cell No.		
Fort Wayne, Indiana 46808				f. Fax. No.			
			g. e-mail ggerdes4	14@frontier.	com		
h. The above-named labor organization has engaged in and is enga	aging in unfai	r labor practices within the	meaning	of section 8(b)	and (list subsections)		
8(b)(3)		of the Natio	nal Labor F	Relations Act, a	nd these unfair labor		
practices are practices affecting commerce within the meaning of	f the Act, or th	hese unfair labor practices	affecting of	commerce withi	n the meaning of		
the Act and the Postal Reorganization Act.							
3. Name of Employer		4a. Tel. No.	b. Cell No	o	c. Fax No.		
United Natural Foods, Inc.		260-480-7253	952-250				
		d. e-mail Michael.A.Asleson@	unfi.com				
5. Location of plant involved (street, city, state and ZIP code) 4815 Executive Blvd. Fort Wayne, IN 46808			6. Employ Adam-P	er representati aul Tuzzo	ve to contact		
7. Type of establishment (factory, mine, wholesaler, etc.) Grocery Wholesale	8. Identify p Grocery	rincipal product or service		9. Number of 160	f workers employed		
10. Full name of party filing charge Adam-Paul Tuzzo							
11. Address of party filing charge (street, city, state and ZIP code) 111 E. Kilbourn Ave., Suite 1000, Milwaukee, WI 53202		11a. Tel. No. 414-291-5536	b. Cell No 414-374		c. Fax No. 414-291-5526		
		d. e-mail atuzzo@littler.com		<u> </u>			
12. DECLARATION I declare that I have read the above charge	and that the	statements		Tel. No. (414) 291-55	36		
are true to the best of my knowledge and belief.  /s/ Adam-Paul Tuzzo  Adam-Paul Tuzzo			Cell No. (414) 374-3980				
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)	Fax No. (414) 291-5526				
Address 111 E. Kilbourn Ave. Suite 1000 Milwaukee WI 5	3202	Date December 16, 201	9	e-mail atuzzo@little	er.com		

# WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.